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DLO-L7L
30-561

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F3M1/0117

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

City, State and ZIP Code

Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
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First Named Applicant 08/314,547 09/28/94 041 ASHER, K 3307 01/17/96

TITLE OF INVENTION DOUBEK, WILLIAM J.

NASAL DILATOR

	ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
3	C348120008	128-200.240	577	UTILITY	YES	\$625.00	04/17/96

3. Correspondence address change (Complete only if there is a change)

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 Kinney & Lange, P.A.

2 _____

3 _____

060 JS 04/18/96 08314547

DO NOT USE THIS SPACE
1 242 625.00 CK

060 JS 04/18/96 08314547

1 561 30.00 CK

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

Creative Integration & Design, Inc.

(2) ADDRESS: (CITY & STATE OR COUNTRY)

St. Paul, Minnesota

6a. The following fees are enclosed:

Issue Fee Advance Order # of Copies _____ 10

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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)

4/9/96

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PTO-85B (REV. 4-94) (0651-0033)

4/9/96

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

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